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Substitute for Form PTO 1449						
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)			Complete if Known			
			Application No.		10/563,531	
			Filing Date			
			First Named Inventor		Gustavsson, Fredrik	
			Art Unit		2852	
Examiner Name		Wachsman				
Sheet	1	of	1	Attorney Docket No.		0100508/0538460
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Exam iner initial	Cite No.	DOCUMENT NUMBER Number-Kind code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant	
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Exam iner Initial s	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published				T

EXAMINER SIGNATURE /Hal Wachsman/

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